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Application Number

Signature Printed name Barry E. Bretschneider	TRANSMITTAL FORM					November 10, 2004	
Examiner Name Not Yet Assigned						Masaharu SUZUKI	
Total Number of Pages in This Submission Attorney Docket Number 350292002900 ENCLOSURES (Check all that apply)						3722	
See Transmittal Form	(to be used for all correspondence after initial filing)			Examiner N	lame	Not Yet Assigned	
Fee Transmittal Form Drawing(s)	Total Number of Pages in This Submission			Attorney Do	cket Numbe	350292002900	
Status Letter Affidavits/declaration(s) Petition to Convert to a Provisional Application Proprietary Information Affidavits/declaration(s) Power of Attorney, Revocation Change of Correspondence Address Status Letter X Other Enclosure(s) (please Identify below): Request for Refund Request CD, Number of CD(s) Certified Copy of Priority Document(s) Remarks Remarks Remarks Remarks Remarks Remarks Remarks Reply to Missing Parts under 37 CFR 1.52 or 1.53 Signature Reply Enclosure Remarks	ENCLOSURES (Check all that apply)						
Appeals and Interferences Appeals Communication to TC (Appeal Notice, Brief, Reply Brief) Petition After Final Petition to Convert to a Provisional Application Proprietary Information Status Letter Status Letter Terminal Disclaimer Extension of Time Request Extension of Time Request Request for Refund CD, Number of CD(s) Certified Copy of Priority Document(s) Reply to Missing Parts Incomplete Application Reply to Missing Parts under SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name MORRISON & FOERSTER LLP Signature Printed name Barry E. Bretschneider Date Petition Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Proprietary Information Status Letter X Other Enclosure(s) (please Identify Identify below): Request for Corrected Official Filing Receipt Official Filing Receipt with changes Printed name Barry E. Bretschneider	Fee Trans	mittal Form	Drawing(s)				
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Date November 26, 2007 Reg. No. 28,055	Printed name	Barry E. Bretschneider					
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